

Claim # 15 is missed

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003					Application or Docket Number <i>10677425</i>
CLAIMS AS FILED - PART I					SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY <input type="checkbox"/>
(Column 1)		(Column 2)			
TOTAL CLAIMS <i>22</i>					RATE <input type="checkbox"/> FEE
FOR		NUMBER FILED	NUMBER EXTRA		RATE <input type="checkbox"/> FEE
TOTAL CHARGEABLE CLAIMS <i>22</i> minus 20 =		<i>* 2</i>			BASIC FEE <input type="checkbox"/> 385.00
INDEPENDENT CLAIMS <i>3</i> minus 3 =		<i>* 0</i>			X\$ 9= <input type="checkbox"/>
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>					X43= <input type="checkbox"/>
					+145= <input type="checkbox"/>
					TOTAL <input type="checkbox"/>
					OR TOTAL <i>806</i>
* If the difference in column 1 is less than zero, enter "0" in column 2					
CLAIMS AS AMENDED - PART II					SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY <input type="checkbox"/>
(Column 1)		(Column 2)		(Column 3)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/> ADDI- TIONAL FEE
	Total <i>*</i>	Minus	**	=	X\$ 9= <input type="checkbox"/>
	Independent <i>*</i>	Minus	***	=	X43= <input type="checkbox"/>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				
<i>1821</i>					TOTAL <input type="checkbox"/> ADDITIONAL FEE
					OR TOTAL <input type="checkbox"/> ADDITIONAL FEE
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/> ADDI- TIONAL FEE
	Total <i>*</i>	Minus	**	=	X\$ 9= <input type="checkbox"/>
	Independent <i>*</i>	Minus	***	=	X43= <input type="checkbox"/>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				
					TOTAL <input type="checkbox"/> ADDITIONAL FEE
					OR TOTAL <input type="checkbox"/> ADDITIONAL FEE
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/> ADDI- TIONAL FEE
	Total <i>*</i>	Minus	**	=	X\$ 9= <input type="checkbox"/>
	Independent <i>*</i>	Minus	***	=	X43= <input type="checkbox"/>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				
					TOTAL <input type="checkbox"/> ADDITIONAL FEE
					OR TOTAL <input type="checkbox"/> ADDITIONAL FEE
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.					
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."					
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."					
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.					